FORM 1	STATEM	IENT OF		2011			
Please print or type your name, mailing address, agency name, and position below:	FINANCIAI	INTEREST	$S = \begin{bmatrix} 1 \end{bmatrix}$				
LAST NAME - FIRST NAME - MIDDLE N  MAILING ADDRESS:	hard a	FOR CUSE O	NLY:	\$\$			
608 NW 37	INDT			<u>2.111 07940958 90E Le∈ Co⊦</u> 1 Code			
CAPE CORAL 3							
NAME OF AGENCY:  NAME OF OFFICE OR POSITION HELD OF AGENCY:  You are not limited to the space on the lines of the space on the space on the lines of the space on the space on the lines of the space on the lines of the space on the space of the space on the space of the space on the space on the space of			Cor	nf. Code Req. Code			
CHECK ONLY IF A CANDIDATE OF	APPOINTEE						
**** BOTH PARTS OF THIS SECTION MUST BE COMPLETED ****  DISCLOSURE PERIOD:  THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):  DECEMBER 31, 2011  OR  SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR:  MANNER OF CALCULATING REPORTABLE INTERESTS:  THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (must check one):  COMPARATIVE (PERCENTAGE) THRESHOLDS  OR  DOLLAR VALUE THRESHOLDS							
PART A PRIMARY SOURCES OF INCO		he reporting person - See instr					
NAME OF SOURCE OF INCOME	sou	PRCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY				
MISONE MORE	Phillipselphia	PA					
PENISON FUND OF	1,0 55 5 1,0						
noothern N.J.	12 EDISONAU	E SPRINGFIELD, N	7				
	NCOME ther sources of income to business , you must write "none" or "n/a"		son - See	instructions p. 4]			
NAME OF N BUSINESS ENTITY	AME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE			
			- <del>-</del>				
PART C REAL PROPERTY (Land, buildi (If you have nothing to report,		when	IG INSTRUCTIONS for and where to file this form cated at the bottom of page 2.				
3316 PINC ST 3	3952		file th	RUCTIONS on who must is form and how to fill it out on page 3.			
			OTHI to file	ER FORMS you may need are described on page 6.			

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions p. 5]  (If you have nothing to report, you must write "none" or "n/a")							
TYPE OF INTANGIBLE		BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
		· · · · ·					
		· · · · · · · · · · · · · · · · · · ·					
PART E — LIABILITIES [Major det (If you have nothing to	ots - See instructions p. 5] report, you must write "no	ne" or "n/a")					
NAME OF CREDITOR		ADDRESS OF CREDITOR					
NO ONG							
4.							
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5]  (If you have nothing to report, you must write "none" or "n/a")  BUSINESS ENTITY # 1 , BUSINESS ENTITY # 2 BUSINESS ENTITY # 3							
NAME OF BUSINESS ENTITY							
ADDRESS OF BUSINESS ENTITY							
PRINCIPAL BUSINESS ACTIVITY		,					
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS							
NATURE OF MY OWNERSHIP INTEREST			·				
IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE							
SIGNATURE (required):  DATE SIGNED (required):				(required):			
There I Ele			6/28/12				

#### WHAT TO FILE:

After completing all parts of this form, including sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

### NOTE:

### MULTIPLE FILING UNNECESSARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

# **FILING INSTRUCTIONS:**

### WHERE TO FILE:

If you were mailed the form by the Commission your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

Facsimiles will not be accepted.

## WHEN TO FILE:

initially, each local officer/employee, state file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

**Candidates** for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.